CITY OF LINDEN APPLICATION FORM

REQUEST FOR PUBLIC RECORDS

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(PLEASE PRINT)		
Nar	ne: Date:	
Org	anization (If Applicable):	
Mailing Address:		
City, State, Zip:		
Home/Business Phone E-MAIL		
REQUEST MADE VIA: □ OFFICE VISIT □ CORRESPONDENCE □ FAX		
DESCRIPTION OF PUBLIC RECORD(S): (Please be specific and attach additional pages of information if necessary)		
(Plea	ise be specific and attach additional pages of information if necessary)	
	DANDER AMERICA ON TRATE (OM AND TRADE) AND MAINTAIN DISTRICT HOLDS	
	INSPECT / VIEW DOCUMENTS "ONLY" (DURING NORMAL BUSINESS HOURS)	
	PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR PURCHASE	
	PREPARE PHOTOCOPIES OF ALL REQUESTED DOCUMENTS FOR FORCEINGE	
	SEND RESPONSE BY E-MAIL	
	COPY OF MINUTES (SPECIFY BOARD OR ENTITY, DATE, TOPIC OR OTHER IDENTIFYING INFORMATION)	
	COPY OF ORDINANCE OR RESOLUTION (SPECIFY DATE, NUMBER OR OTHER IDENTIFYING INFORMATION)	
	OTHER (CRECIES)	
	OTHER (SPECIFY)	
	LICENSE INFORMATION (SPECIFY)	
07.0		
SIGNATURE:		
INFORMATION ON A SPECIFIC PROPERTY: ADDRESS:		
RTO	BLOCK/LOT:	